

United States District Court

DISTRICT OF Massachusetts

CHARLENE H. WILLIAMS,
Plaintiff

SUMMONS IN A CIVIL CASE

v.

CASE NUMBER:

04 12153 NMG

CAVALRY INVESTMENTS, LLC and
CAVALRY PORTFOLIO SERVICES, LLC,
Defendants

TO: (Name and address of defendant)

CAVALRY PORTFOLIO SERVICES, LLC
c/o Registered Agent - CT Corp. System
10 Federal Street
Boston, MA 02110

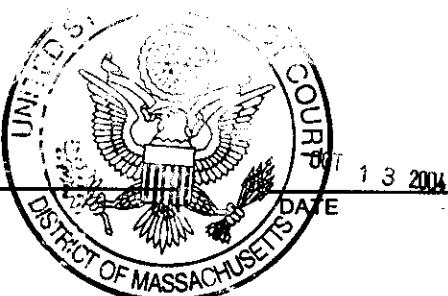
YOU ARE HEREBY SUMMONED and required to serve upon PLAINTIFF'S ATTORNEY (name and address)

Yvonne W. Rosmarin
Law Office of Yvonne W. Rosmarin
58 Medford Street
Arlington, MA 02474

an answer to the complaint which is herewith served upon you, within 20 days after service of this summons upon you, exclusive of the day of service. If you fail to do so, judgment by default will be taken against you for the relief demanded in the complaint. You must also file your answer with the Clerk of this Court within a reasonable period of time after service.

CLERK

(BY) DEPUTY CLERK





Suffolk County Sheriff's Department • 45 Bromfield Street • Boston, MA 02108 • (617) 989-6999
Suffolk, ss.

November 2, 2004

I hereby certify and return that on 11/1/2004 at 2:40PM I served a true and attested copy of the usdcSummons, Amended Complaint and Statement of Damages in this action in the following manner: To wit, by delivering in hand to Y.Concepcion, Process Clerk & agent in charge of CT Corp & agent in charge at time of service, for Cavalry Portfolio Services, LLC, at, 101 Federal Street, C/O CT Corporation Systems Boston, MA 02108. Basic Service Fee (IH) (\$30.00), Postage and Handling (\$1.00), Attest/Copies (\$5.00) Total Charges \$36.00

Deputy Sheriff John Cotter

Deputy Sheriff

Address of Server

Signature of Server

Date

I declare under penalty of perjury under the laws of the United States of America that the foregoing information contained in the Return of Service and Statement of Service Fees is true and correct.

John Cotter

DECLARATION OF SERVER		
TRAVEL	SERVICES	TOTAL
STATEMENT OF SERVICE FEES		
<input type="checkbox"/> Other (specify): _____ <input type="checkbox"/> Returned unexecuted: _____ <input type="checkbox"/> Left copies thereof at the defendant's dwelling house or usual place of abode with a person of suitable age and discretion then residing therein. <input type="checkbox"/> Served personally upon the defendant. Place where served: _____ <input type="checkbox"/> Name of person with whom the summons and complaint were left: _____ 		
<input type="checkbox"/> Check one box below to indicate appropriate method of service <input type="checkbox"/> NAME OF SERVER (PRINT) <input type="checkbox"/> DATE <input type="checkbox"/> TITLE <input type="checkbox"/> Service of the Summons and Complaint was made by me 		
RETURN OF SERVICE		